Achieving Hemostasis Post Insertion of a Peripherally Inserted Central Catheter
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Hemostasis Disc Technology

Dressing change after 7 days to document integrity of the disc, integrity of the skin and their perception of ease of removal.

Purpose:
The PICC team wanted to find a more efficient and cost-effective method to stop bleeding at the time of PICC line insertion while maintaining a low infection rate.

Project:
Data was collected using a form that was completed with each PICC line insertion on the Hematology/Oncology/Bone Marrow Transplant unit. The form included information on the patient's anticoagulation therapy, lab values, time to hemostasis, whether or not there was bleeding or oozing after application requiring a dressing change after hemostasis was achieved and the nurses perception on the ease of application. The PICC nurse applied the Hemostasis Disc on all new PICC insertions and collected amount of time for hemostasis to be achieved. During the trial period, the PICC Nurse completed the first dressing change and completed the first.

Method

- The gauze method data and the Hemostasis Disc method data was collected using a form that was completed with each PICC line insertion on the Hematology/Oncology/Bone Marrow Transplant unit. The form included the following data collection points:
  - Anticoagulation therapy
  - Lab values
  - Time to hemostasis
  - Bleeding or oozing after initial hemostasis achieved
  - RN perception of ease of application
  - During the trial period, the PICC RN completed the first dressing change and noted the following data collection points on the form:
    - Integrity of the Disc
    - Integrity of the skin
    - RN perception of ease of removal
  - The data was compiled in an Excel Spreadsheet and pivot tables were used to analyze the data.

Abstract

Background:
Bleeding lines involve increased nursing time and supply cost. The previous practice for preventing oozing from the insertion site required a follow-up dressing change in 24-48 hour.

Conclusion:
The Hemostasis Disc is easy to apply as indicated by 100% of the PICC RN's.

- Greater than 50% of PICC RN's noted issues with the ease of removal of the hemostasis disc and 99% of the time skin integrity was maintained.
- Disc crumbled during removal
- Discored patient's skin
- Discussions with the vendors indicated that is a normal expectation as the disc is a mineral based product as the disc absorbs blood, and dries it may crumble and the iron in the product may temporarily discolor the skin.

Conclusions

- This practice eliminated the need for a 24 hour dressing change decreasing the number of bleeding and oozing lines.
- Decreased the PICC line infection rate in high risk patient populations.
- One year survey of the PICC Team indicated continued positive feedback about the product and positive patient outcomes.
- The Hemostasis Disc trialed is being adopted throughout the Mayo Clinic Enterprise in policy convergence.

References